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**To:** U.S. Patent and Trademark Office – From: Christian R. Andersen  
Examiner: Mehdi EMADADI Sr. Paralegal – Intellectual Property  
Group Art Unit: 2663

**Fax:** 703-872-9306 **Pages with Cover:** 19

**FORMAL SUBMISSION OF:**

**1) Transmittal Form; and 2) Amendment**

**Title:** METHOD AND APPARATUS FOR DETECTING UNRELIABLE OR  
COMPROMISED ROUTER/SWITCHES IN LINK STATE ROUTING  
**Serial No.** 09/533,467  
**Filing Date:** March 23, 2000  
**First Named Inventor:** BURCHFIEL  
**Atty. No.** 99-442

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that the above-referenced documents are facsimile transmitted to the Patent and Trademark Office on the date shown below:

  
Christian R. Andersen

Date of Transmission: March 17, 2004

In re Application of:

Docket No. 99-442

BURCHFIEL ET AL.

Customer No.: 32127

Application No: 09/533,467

Examiner: Mehdi Emdadi

Filed: March 23, 2000

Group Art Unit: 2663

For: METHOD AND APPARATUS FOR DETECTING  
 UNRELIABLE OR COMPROMISED  
 ROUTER/SWITCHES IN LINK STATE ROUTING

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## CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being transmitted by facsimile to the United States Patent Office at 703-872-9314.

Dated: March 17, 2004

Signature:

(Christian R. Andersen)

MAIL STOP – NON-FEE AMENDMENT  
 THE COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

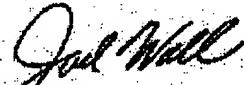
No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 23	MINUS	** 23	0	\$9 \$18	\$00
INDEP. CLAIMS	* 7	MINUS	*** 7	= 0	x \$43 \$86	\$00
Fee for Multiple Dependent claims \$145°/\$290						\$-0-
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
- Verified Statement claiming small entity status is enclosed, if not filed previously.
- A check in the amount of \$ \_\_\_\_\_.00 is enclosed.
- Charge \$ \_\_\_\_\_.00 to Deposit Account No. 07-2347. A duplicate copy of this sheet is enclosed.
- Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 07-2339 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 07-2347. A duplicate copy of this paper is enclosed.
- A check in the amount of \$ \_\_\_\_\_.00 to cover the fee for a \_\_\_\_\_.00 month extension is enclosed.
- A check in the amount of \$ \_\_\_\_\_.00 to cover the Information Disclosure Statement fee is enclosed.

Respectfully submitted,

  
Joel Wall  
Reg. No. 25,648

Date: March 17, 2004

c/o Christian R. Andersen  
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